


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PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. M4065 0485/P485	
		First Inventor	Glen Hush
		Title	PROGRAMMABLE CONDUCTOR RANDOM ...
		Express Mail Label No	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27</small> 3. <input checked="" type="checkbox"/> Specification [Total Pages 27] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9] 5. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies 		


ACCOMPANYING APPLICATIONS PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i) <small>Applicant must attach form PTO/SB/35 or its equivalent</small> 17. <input type="checkbox"/> Other	

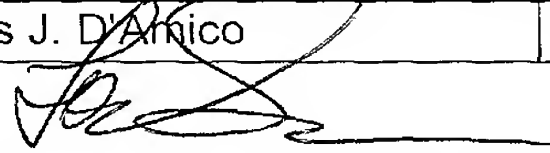
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

☐ Continuation
 ☐ Divisional
 ☐ Continuation-in-part (CIP)
 of prior application No. _____

Prior application information Examiner _____ Group / Art Unit _____

For CONTINUATION or DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 24998		or <input type="checkbox"/> Correspondence address below	
Name DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP					
Address 2101 L Street NW					
City	Washington	State	DC	Zip Code	20037-1526
Country	US	Telephone	(202) 785-9700	Fax	(202) 887-0689

Name (Print/Type)	Thomas J. D'Amico	Registration No. (Attorney/Agent)	28,371
Signature			Date March 5, 2002

FEE TRANSMITTAL for FY 2002 <small>Patent fees are subject to annual revision.</small>		Complete if Known		
		Application Number	New	
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Filing Date	March 5, 2002	
		First Named Inventor	Glen Hush	
		Examiner Name	Not Yet Assigned	
TOTAL AMOUNT OF PAYMENT (\$)		1380 00	Attorney Docket No	M4065.0485/P485
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)		
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES		
<input checked="" type="checkbox"/> Deposit Account		Large Entity Small Entity		
Deposit Account Number 04-1073		Fee Code Fee (\$)		
Deposit Account Name Dickstein Shapiro Morin & Oshinsky LLP		Fee Code Fee (\$)		
The Commissioner is hereby authorized to: (check all that apply)		Fee Description		
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		Fee Paid		
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application				
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account				
FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity Small Entity				
Fee Code Fee (\$)		Fee Code Fee (\$)		
Fee Description				
Fee Paid				
101 740 201 370 Utility filing fee 740 00				
106 330 206 165 Design filing fee				
107 510 207 255 Plant filing fee				
108 740 208 370 Reissue filing fee				
114 160 214 80 Provisional filing fee				
SUBTOTAL (1) (\$)		740 00		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims 44 -20** = 24 x 18 00 = 432 00				
Independent Claims 5 -3** = 2 x 84 00 = 168 00				
Multiple Dependent 280 00 = 0				
Large Entity Small Entity				
Fee Code Fee (\$)		Fee Code Fee (\$)		
Fee Description				
103 18 203 9 Claims in excess of 20				
102 84 202 42 Independent claims in excess of 3				
104 280 204 140 Multiple dependent claim, if not paid				
109 84 209 42 ** Reissue independent claims over original patent				
110 18 210 9 ** Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2) (\$)		600 00		
**or number previously paid if greater, For Reissues, see above				
SUBMITTED BY		Complete (if applicable)		
Name (Print/Type) Thomas J D'Amico		Registration No (Attorney/Agent) 28,371		
Signature		Telephone (202) 828-2232		
		Date March 5, 2002		